

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # P96000086784 (1)

1. Corporation Name
HEBDO MAG FLORIDA, INC.



Principal Place of Business

980 SUNTRUST INTERNATIONAL CTR
1 SE 3RD AVENUE
MIAMI FL 33131

Mailing Address

980 SUNTRUST INTERNATIONAL CTR
1 SE 3RD AVENUE
MIAMI FL 33131-1700

444 Brickell Ave.

444 Brickell Ave.

2. Principal Place of Business

21 ~~1 SE 3RD AVE~~

2a. Mailing Address

26 ~~1 SE 3RD AVE~~

Suite, Apt. #, etc.

22 ~~STE 928~~

Suite, Apt. #, etc.

27 ~~STE 928~~

City & State

23 Miami Florida

City & State

28 Miami Florida

Zip

24 33131

Country

25 USA

Zip

29 33131

Country

9. Name and Address of Current Registered Agent

GONZALEZ, IRVING J

~~980 SUNTRUST INTERNATIONAL CTR~~

~~1 SE 3RD AVENUE~~

~~MIAMI FL 33131~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

444 Brickell Ave.

83 Suite 928

84 City

MIAMI

FL 85 Zip Code

33131

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME *Pres. EUGENE BARLOT*

STREET ADDRESS *444 Brickell Ave. Ste. 928*

CITY-ST-ZIP *MIAMI, FL. 33131*

TITLE ☐ DELETE

NAME *U.P. Tony BATALAN, SR.*

STREET ADDRESS *444 Brickell Ave. Ste. 928*

CITY-ST-ZIP *MIAMI, FL. 33131*

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☒ Addition

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☒ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address

SIGNATURE:

T. Batalan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TONY BATALAN, SR.

Date

(305) 374-4343

Daytime Phone #

0174778

CR2E034 (9/96)